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<b>SERIAL NUMBER</b> 09/628,112	<b>FILING OR 371(c) DATE</b> 07/27/2000 <b>RULE</b>	<b>CLASS</b> 530	<b>GROUP ART UNIT</b> 1647	<b>ATTORNEY DOCKET NO.</b> JHU1120-11
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/124,180 07/28/1998 ABN which is a CIP of 09/019,070 02/05/1998 ABN  
which is a CIP of 08/862,445 05/23/1997 ABN  
which is a CIP of 08/847,910 04/28/1997 ABN  
which is a CIP of 08/795,071 02/05/1997 PAT 5,994,618  
which is a CIP of 08/525,596 10/26/1995 PAT 5,827,733

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/13/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 33	<b>INDEPENDENT CLAIMS</b> 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

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## TITLE

PROMYOSTATIN PEPTIDES AND METHODS OF USING SAME

<b>FILING FEE RECEIVED</b> 657	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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